

**BEFORE THE  
MEDICAL BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA**

**In the Matter of the Accusation  
Against:**

**BHUPINDER SINGH CHAHAL, M.D.**

**Case No. 800-2018-045189**

**Physician's and Surgeon's  
Certificate No. C53601**

**Respondent**

**DECISION**

**The attached Stipulated Surrender of License is hereby adopted as the  
Decision and Order of the Medical Board of California, Department of  
Consumer Affairs, State of California.**

**This Decision shall become effective at 5:00 p.m. on MARCH 19, 2019.**

**IT IS SO ORDERED MARCH 12, 2019.**

**MEDICAL BOARD OF CALIFORNIA**

**By:**

  
**Kimberly Kirchmeyer  
Executive Director**

1 XAVIER BECERRA  
Attorney General of the State of California  
2 JANE ZACK SIMON  
State Bar No. 116564  
3 Supervising Deputy Attorney General  
455 Golden Gate Avenue, Suite 11000  
4 San Francisco, CA 94102  
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6

7 *Attorneys for Complainant*  
8 *Medical Board of California*

9 **BEFORE THE**  
10 **MEDICAL BOARD OF CALIFORNIA**  
11 **DEPARTMENT OF CONSUMER AFFAIRS**  
12 **STATE OF CALIFORNIA**

13 **In the Matter of the Accusation Against:**

14 **BHUPINDER SINGH CHAHAL, M.D.**  
15 6800 W. Central #D3  
16 Toledo OH 43617-1157

17 Physician's and Surgeon's Certificate No. C53601

Case No.: 800-2018-045189

**STIPULATED SURRENDER OF  
LICENSE**

18 IT IS HEREBY STIPULATED AND AGREED by and between the parties in this  
19 proceeding, that the following matters are true:

20 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical  
21 Board of California (Board). She brought this action solely in the official capacity, and is  
22 represented by Xavier Becerra, Attorney General of the State of California, by Jane Zack Simon,  
23 Supervising Deputy Attorney General.

24 2. Respondent Bhupinder Singh Chahal, M.D. (Respondent) is representing himself  
25 in this proceeding. Respondent's current address is 6800 W. Central #D3, Toledo, Ohio 43617-  
26 1157.

27 3. On March 4, 2009, the Medical Board of California issued Physician's and  
28 Surgeon's Certificate No. C53601 to Respondent. The certificate will expire on March 31, 2019,

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1 and is SUSPENDED pursuant to an Order issued by the Board on August 8, 2018 under Business  
2 and Professions Code section 2310(a).

3 4. Respondent has received, read and understands the Accusation which is presently  
4 on file and pending in case number 800-2018-045189 (Accusation) a copy of which is attached as  
5 Exhibit A. Respondent also has carefully read and understands the effects of this Stipulated  
6 Surrender of License (Stipulation).

7 5. Respondent is fully aware of his legal rights in this matter, including the right to a  
8 hearing on the charges and allegations in the Accusation; the right to be represented by counsel, at  
9 his own expense; the right to confront and cross-examine the witnesses against him; the right to  
10 present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel  
11 the attendance of witnesses and the production of documents; the right to reconsideration and  
12 court review of an adverse decision; and all other rights accorded by the California  
13 Administrative Procedure Act and other applicable laws. Respondent voluntarily, knowingly, and  
14 intelligently waives and gives up each and every right set forth above.

15 6. For the purpose of resolving the charges and allegations in the Accusation, without  
16 the expense and uncertainty of further proceedings, Respondent agrees that based on the action  
17 taken by the State Medical Board of Ohio as alleged in the Accusation, cause exists to discipline  
18 his California physician's and surgeon's certificate. Respondent wishes to surrender his  
19 California certificate at this time.

20 7. Pursuant to section 2224(b) of the Business and Professions Code, this Stipulation  
21 for Surrender of License shall be subject to the approval of the Board. Respondent understands  
22 and agrees that the Medical Board's staff and counsel for Complainant may communicate directly  
23 with the Board regarding this Stipulation without notice to or participation by Respondent. By  
24 signing this Stipulation, Respondent understands and agrees that he may not withdraw his  
25 agreement or seek to rescind the Stipulation prior to the time the Board considers and acts upon it.  
26 In the event that this Stipulation is rejected for any reason by the Board, it will be of no force or  
27 effect for either party. The Board will not be disqualified from further action in this matter by  
28 virtue of its consideration of this Stipulation.

8. Upon acceptance of this Stipulation by the Board, Respondent understands that he will no longer be permitted to practice as a physician and surgeon in California, and also agrees to surrender and cause to be delivered to the Board any license and wallet certificate in his possession before the effective date of the decision.

9. The admissions made by Respondent herein are only for the purposes of this proceeding, or any other proceedings in which the Medical Board or other professional licensing agency is involved, and shall not be admissible in any other criminal or civil proceeding.

10. Respondent fully understands and agrees that if he ever files an application for relicensure or reinstatement in the State of California, the Board shall treat it as a petition for reinstatement, and Respondent must comply with all laws, regulations and procedures for reinstatement of a revoked license in effect at the time the petition is filed.

11. Respondent understands that he may not petition for reinstatement as a physician and surgeon for a period of three (3) years from the effective date of his surrender. Information gathered in connection with Accusation number 800-2018-045189 may be considered by the Board in determining whether or not to grant the petition for reinstatement. For the purposes of the reinstatement hearing, the allegations contained in Accusation number 800-2018-045189 shall be deemed to be admitted by Respondent, and Respondent waives any and all defenses based on a claim of laches or the statute of limitations.

12. The parties understand and agree that facsimile or electronic copies of this Stipulated Surrender of License, including facsimile or electronic signatures thereto, shall have the same force and effect as the originals.

## ACCEPTANCE

I have carefully read the above Stipulated Surrender of License. I enter into it freely and voluntarily and with full knowledge of its force and effect do hereby surrender my Physician and Surgeon's Certificate Number C53601 to the Medical Board of California, for its formal acceptance. By signing this Stipulation to surrender my license, I recognize that upon its formal acceptance by the Board, I will lose all rights and privileges to practice as a physician and

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1 surgeon in the State of California and I also will cause to be delivered to the Board any license  
2 and wallet certificate in my possession before the effective date of the decision.

3  
4 DATED: Feb 5, 2019

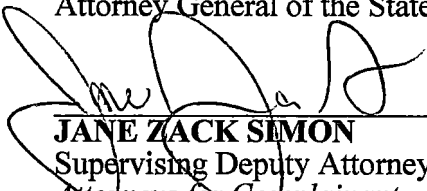
  
BHUPINDER SINGH CHAHAL, M.D.  
Respondent

6  
7 **ENDORSEMENT**

8 The foregoing Stipulated Surrender of License is hereby respectfully submitted for  
9 consideration by the Medical Board of California.

10 DATED: 2/11/19

XAVIER BECERRA  
Attorney General of the State of California

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13   
JANE ZACK SIMON  
Supervising Deputy Attorney General  
Attorneys for Complainant

# **EXHIBIT A**

**Accusation No. 800-2018-045189**

1 XAVIER BECERRA  
Attorney General of California  
2 JANE ZACK SIMON  
Supervising Deputy Attorney General  
3 State Bar No. 116564  
4 455 Golden Gate Avenue, Suite 11000  
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Telephone: (415) 510-3521  
5 Facsimile: (415) 703-5480  
E-mail: Janezack.simon@doj.ca.gov  
6 *Attorneys for Complainant*

FILED  
STATE OF CALIFORNIA  
MEDICAL BOARD OF CALIFORNIA  
SACRAMENTO Sept. 11 20 18  
BY [Signature] ANALYST

7  
8 **BEFORE THE**  
9 **MEDICAL BOARD OF CALIFORNIA**  
10 **DEPARTMENT OF CONSUMER AFFAIRS**  
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

Case No. 800-2018-045189

13 **BHUPINDER SINGH CHAHAL, M.D.**  
14 6800 W. Central D-3  
Toledo, OH 43617-1157

**A C C U S A T I O N**

15 Physician's and Surgeon's Certificate  
16 No. C53601

17 Respondent.

18 The Complainant alleges:

19 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board  
20 of California, Department of Consumer Affairs, and brings this Accusation solely in her official  
21 capacity.

22 2. On March 4, 2009, Physician's and Surgeon's Certificate No. C53601 was issued by  
23 the Medical Board of California (Board) to Bhupinder Singh Chahal, M.D. (Respondent). The  
24 certificate is renewed and current with an expiration date of March 31, 2019; however, the  
25 certificate is in SUSPENDED status by virtue of an Order issued by the Board on August 8, 2018  
26 pursuant to Business and Professions Code section 2310(a).

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A. Section 2227 of the Code provides in part that the Board may revoke, suspend for a period not to exceed one year, or place on probation, the license of any licensee who has been found guilty under the Medical Practice Act, and may recover the costs of probation monitoring.

C. Section 141 of the Code provides:

“(b) Nothing in this section shall preclude a board from applying a specific statutory provision in the licensing act administered by the board that provides for discipline based upon a disciplinary action taken against the licensee by another state, an agency of the federal government, or another country.”

## (Discipline, Restriction, or Limitation Imposed by Another State)

4. On May 9, 2018, the State Medical Board of Ohio entered an Order revoking Respondent's license to practice medicine in Ohio. The Order was based on Respondent's execution of a license Surrender, with consent to permanent revocation. Respondent stipulated



1 that his license surrender was taken in lieu of further investigation in to his utilization of  
2 controlled substances for himself and family members. A copy of the Order entered by the State  
3 Medical Board of Ohio is attached as Exhibit A.

4 5. Respondent's conduct and the action of the State Medical Board of Ohio, as set forth  
5 in paragraph 4, above, constitutes cause for discipline pursuant to sections 2305 and/or 141 of the  
6 Code.

7 **PRAYER**

8 **WHEREFORE**, Complainant requests that a hearing be held on the matters herein alleged,  
9 and that following the hearing, the Board issue a decision:

10 1. Revoking or suspending Physician's and Surgeon's Certificate Number C53601  
11 issued to Respondent Bhupinder Singh Chahal, M.D.;

12 2. Revoking, suspending or denying approval of Respondent's authority to supervise  
13 physician assistants and advanced practice nurses;

14 3. Ordering Respondent, if placed on probation, to pay the costs of probation  
15 monitoring; and

16 4. Taking such other and further action as the Board deems necessary and proper.

17 DATED: September 11, 2018

18   
19 **KIMBERLY KIRCHMEYER**  
20 Executive Director  
21 Medical Board of California  
22 Department of Consumer Affairs  
23 State of California  
24 Complainant  
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# **EXHIBIT A**

BEFORE THE STATE MEDICAL BOARD OF OHIO

IN THE MATTER OF

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\*

BHUPINDER CHAHAL, M.D.

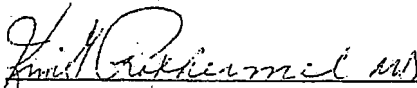
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ENTRY OF ORDER

On April 20, 2018, Bhupinder Chahal, M.D., executed a Surrender of his license to practice medicine and surgery in Ohio with consent to permanent revocation, which document is attached hereto and fully incorporated herein.

Wherefore, upon ratification by the Board of the surrender, it is hereby ORDERED that Certificate No. 35.048719 authorizing Bhupinder Chahal, M.D., to practice medicine and surgery in the State of Ohio be permanently REVOKED.

This Order is hereby entered upon the Journal of the State Medical Board of Ohio for the 9th day of May 2018, and the original thereof shall be kept with said Journal.



Kim G. Rothermel, M.D.  
Secretary

(SEAL)

May 9, 2018

Date

STATE OF OHIO  
THE STATE MEDICAL BOARD  
PERMANENT SURRENDER OF CERTIFICATE  
TO PRACTICE MEDICINE AND SURGERY

Do not sign this agreement without reading it. An individual who permanently surrenders a certificate issued by the Board is forever thereafter ineligible to hold a certificate to practice or to apply to the Board for reinstatement of the certificate or issuance of any new certificate. You are permitted to be accompanied, represented and advised by an attorney, at your own expense, before deciding to sign this voluntary agreement.

I, Bhupinder Chahal, M.D., am aware of my rights to representation by counsel, the right of being formally charged and having a formal adjudicative hearing, and do hereby freely execute this document and choose to take the actions described herein.

I, Bhupinder Chahal, M.D., do hereby voluntarily, knowingly, and intelligently surrender my certificate to practice medicine and surgery, License #35.048719, to the State Medical Board of Ohio [Board], thereby relinquishing all rights to practice medicine and surgery in Ohio.

I understand that as a result of the surrender herein I am no longer permitted to practice medicine and surgery in any form or manner in the State of Ohio.

I agree that I shall be ineligible for, and shall not apply for, reinstatement or restoration of certificate to practice medicine and surgery License #35.048719 or issuance of any other certificate pursuant to the authority of the State Medical Board of Ohio, on or after the date of signing this Permanent Surrender of Certificate to Practice Medicine and Surgery. Any such attempted reapplication shall be considered null and void and shall not be processed by the Board.

I hereby authorize the State Medical Board of Ohio to enter upon its Journal an Order permanently revoking my certificate to practice medicine and surgery, License #35.048719, in conjunction with which I expressly waive the provision of Section 4731.22(B), Ohio Revised Code, requiring that six (6) Board Members vote to revoke said certificate, and further expressly and forever waive all rights as set forth in Chapter 119., Ohio Revised Code, including but not limited to my right to counsel, right to a hearing, right to present evidence, right to cross-examine witnesses, and right to appeal the Order of the Board revoking my certificate to practice medicine and surgery.

I, Bhupinder Chahal, M.D., hereby release the Board, its members, employees, agents, officers and representatives jointly and severally from any and all liability arising from the within matter.

This document shall be considered a public record as that term is used in Section 149.43, Ohio Revised Code. Further, this information may be reported to appropriate organizations, data banks and governmental bodies. I, Bhupinder Chahal, M.D., acknowledge that my social security number will be used if this information is so reported and agree to provide my social security number to the Board for such purposes.

MEDICAL BOARD

APR 17 1998

I stipulate and agree that I am taking the action described herein in lieu of further investigation pursuant to Section 4731.22(B)(20), Ohio Revised Code, to wit: Utilizing controlled substances for self and family members, Rule 4731-11-08, Ohio Administrative Code.

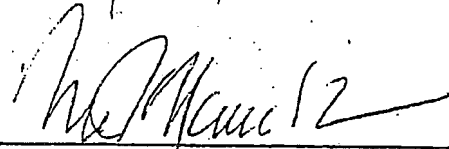
EFFECTIVE DATE

It is expressly understood that this Permanent Surrender of Certificate is subject to ratification by the Board prior to signature by the Secretary and Supervising Member and shall become effective upon the last date of signature below. Further, I specifically acknowledge that the electronic transmission of a scanned or photostatic copy of any executed signature to this Consent Agreement, upon being received by the Board, shall be deemed to have the full legal force and effect as the original.

  
BHUPINDER CHAHAL, M.D.


DATE

4/20/2018

  
MICHAEL MANAHAN  
Attorney for Dr. CHAHAL


DATE

4/25/18

  
KIM G. ROTHERMEL, M.D.  
Secretary

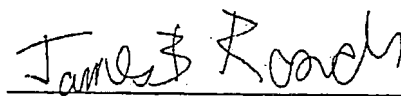
DATE

5/9/18

  
BRUCE R. SAFERIN, D.P.M.  
Supervising Member

DATE

5-9-18

  
JAMES B. ROACH  
Enforcement Attorney

DATE

4/27/18

MEDICAL BOARD

APR 27 2018